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ABSTRACT

The Clinic for Learning, a demonstration and training center at Junior High School 57K in Brooklyn, was conducted jointly by the School of Education at New York University and the New York City Board of Education, with the financial assistance of the Ford Foundation. New York University was to introduce its faculty and students to the public school setting in an attempt to relate theory to the realities of junior high school teaching. At the same time New York City school personnel were to be involved in the processes of positive change within the classroom and between school and community. In addition, community persons from the Bedford-Stuyvesant area, where the school was located, were to be trained to assist in the education of neighborhood children. A central feature of the Clinic for Learning during the first year of the program was the "cluster" system in which 17 regular seventh grade classes were realigned in six clusters of 85-90 children each. The Clinic for Learning was found lacking by Junior High School 57K officials and, likewise, by Clinic for Learning personnel. It was this joint recognition of "failure" that eventually spurred an evaluation of the Clinic for Learning by the Center for Urban Education. The purpose of such an evaluation was to assess the causes for failure.
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A Study of
NYU Clinic for Learning Project
Whitelaw Reid Junior High School (JHS 57)

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CHAPTER I

PROJECT DESCRIPTION

During the period September 1966 to June 1968, the School of Education at New York University and the New York City Board of Education, with the financial assistance of the Ford Foundation, conducted a joint demonstration and training center at Whitelaw Reid Junior High School in Brooklyn [Junior High School 57K]. The experimental project, which came to be known as the Clinic for Learning, had a brief, unhappy, and notorious life.

GOALS

The Clinic for Learning aimed to improve the quality of educational experience for all seventh graders at the school during the first year; for all eighth graders during the second year. It was to be a multi-purposed program with complex dimensions that might only later be fully perceived. New York University was to introduce its faculty and students to the public school setting in an attempt to relate theory to the realities of junior high school teaching. At the same time New York City school personnel were to be involved in the processes of positive change within the classroom and between school and community. In addition, community persons from the Bedford-Stuyvesant area, where the school was located, were to be trained to assist in the education of neighborhood children.

Such a project staff, it was hoped, would undertake the massive effort necessary to remove the obstacles to effective learning that were believed to exist in poor neighborhoods. An ultimate goal of the program was the development of procedures that might serve as models for replication in other urban schools. It was thought that by individualizing instruction and by reconstructing the role of the teacher, children would develop a more positive self-image. Their education would be made more relevant by the creation of new curriculum materials. Finally, through the involvement of students and parents in educational decision-making, Junior High School 57 would be pulled out of its isolation and become, in effect, a "community school," a center for community development as well as educational innovation.

For New York University students the Clinic for Learning would provide a "field" experience during which they could develop a serious commitment to teaching in the city schools. Their professional education would consist of school practice, formal coursework, and seminars that would provide them with a deeper knowledge of community life, which in turn would enhance their insights into children's classroom behavior and its sociocultural bases. Further, a small number of able students from other disadvantaged areas were to be admitted to New York University as assistants in the Clinic for Learning program. They were to be given financial aid, and it

was hoped they would serve as models for junior high school students, inspiring them to educational success.

FEATURES

A central feature of the Clinic for Learning during the first year of the program was the "cluster" system in which 17 regular seventh grade classes were realigned in six clusters of 85 to 90 children each. The school supplied for each cluster a teacher for each of the following subjects: mathematics, social studies, English, and science, as well as an additional teacher position; the university provided a cluster coordinator. College students in the program served under a teacher intern master. All decisions about materials used, assignment of children to classes, and curriculum content were made by the cluster staff.

An immediate anticipated benefit of such a format was that class size would be smaller and, therefore, more manageable by the teachers. Another expected gain was that children would profit by having increased numbers of adults in their midst who would be interested in their academic and personal lives.

Beyond the cluster arrangement, other resources in materials and personnel were planned for. In particular, community coordinators would be hired to serve as liaison between the school and the home, so that a school child could be "reached as a person," and

his individual needs more adequately fulfilled.

It was hoped that by the end of the two-year experiment the project would have demonstrated to the children that they could learn and to the teachers, who had harbored attitudes of defeatism and disdain for some children, that they could succeed with their students. It was further expected that the combined efforts of the project staff would dissipate the negative influences of the "culture of poverty" which, according to the program designers, affected the children to be served.

ASSESSMENT AND EVALUATION

But despite the hard and sincere efforts of many persons, the Clinic for Learning was found lacking by Junior High School 57 officials and, likewise, by Clinic for Learning personnel. Both groups admitted that the program had not been successful. It was this joint recognition of "failure" that eventually spurred an evaluation of the Clinic for Learning by the Center for Urban Education. The purpose of such an evaluation was not to fix blame but rather to assess the causes for failure, in the hope that future attempts at educational innovation involving university, public school, and community would benefit.

On March 15, 1968, representatives from the Center for Urban Education met at Junior High School 57 with the New York University personnel, Junior High School 57 officials and teachers, members of the Local School Board, parents, the District Superintendent and representatives of his office.[1] Feelings ran high. There was clear agreement that the Clinic for Learning did not succeed and that it would not have been continued at Junior High School 57, if various persons had had their choice in the matter. In fact, the Local Advisory Board, which had come into being during the first year of the Clinic for Learning, had already concluded this in an evaluation of its own. (This evaluation was not made public at the meeting.) It was finally agreed that the Center for Urban Education undertake the evaluation with the present writer as Evaluation Director, and that the evaluation team would be given access to documents relating to the Clinic for Learning program and would be permitted to conduct interviews and observations. One teacher at the meeting was most pointed in his reactions, when he declared: "The best thing we could do would be to close this school down and put the kids in the street. They would be better off."

[1] Minutes of this meeting were recorded by a member of the Center for Urban Education. It should be noted that some persons present at the meeting were of the view that an evaluation was not particularly needed, or even wanted, so convinced did they appear to be that the Clinic for Learning had been an utter failure.

CHAPTER II

PROJECT EVALUATION DESIGN AND PROCEDURES

It was late in the school year by the time the evaluation team was officially approved in mid-April 1968. With only two and one-half months remaining before school was out, procedures had to be concentrated on those aspects that would reveal most about the Clinic for Learning which by then had been in existence for almost two years. Some of the original participants in the program had already left; various documents could not be located; and events did not always remain clear in the minds of some persons interviewed.

The evaluation team sought to organize its research around particular themes and events and to measure their outcome against the original Clinic for Learning proposal.[1] How could different versions of what occurred over a two-year span be reconciled? What could be learned for the future?

The eight members of the evaluation team were carefully chosen for their experience in education and their interest in the research. All had had extensive experience with "disadvantaged" students. Four members were university professors, three of these, former

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[1]See Appendix B for original evaluation design proposal. This indicates, more specifically, the questions the team sought to find answers to, and the considerations it deemed relevant in assessing the Clinic for Learning program.

public school teachers. Two members were junior high school teachers in areas housing predominantly minority group children. Two members were students who had worked extensively in community action programs and had themselves attended public schools in disadvantaged neighborhoods. The team's background of experience and academic study included anthropology, psychology, guidance and counseling, language arts, social studies, mathematics, science, educational administration, and curriculum construction.

The total research task was delineated and divided along the perceived lines of "expertise" of the team members. The Evaluation Director undertook to interview the Clinic for Learning Director at New York University, the in-school Clinic for Learning Director, the Principal of Junior High School 57, the District Superintendent, and other persons connected functionally to these key personnel. Further, he reviewed the available documentary evidence relating to the program.

The junior high school teachers queried and observed Junior High School 57 teachers and spoke to children. Where permitted, they reviewed curriculum materials for content.

The team members familiar with community action programs spoke to neighborhood people and interviewed junior high school students in the school and in the neighborhood. In addition, they met with New York University persons who had worked within the Clinic for

Learning and were able to obtain from them taped materials of meetings and class sessions.

One member of the team reviewed Junior High School 57 records on attendance, reading, and testing; he checked curriculum materials for content and classroom presentation; and he also observed classes in various curriculum areas and noted student reaction and involvement.

Another interviewed members of local community action projects and members of the Local School Board.

Still another studied the cluster arrangements. He interviewed students who were not a part of the Clinic for Learning as a basis for comparison with children in the program.

Finally, one member of the team, who made no observations and conducted no interviews, served mainly as a "dispassionate" reader of our findings and as a "neutral" observer to our procedures. He assisted in the revision of our research procedures where necessary. He read the initial write-ups of our research and made critical suggestions.

Of course, there was of necessity overlap in our efforts. We did not erect elaborate and formal questionnaires because of the difficulty with respect to time and access to subjects and informants. Most of our research had to take place during school time, when teachers and school officials were engaged in their usual activity.

We were accorded cooperation and assistance, however, in most instances. On occasion we were told that materials could not be located, and we assumed these instances to be honestly reported to us.[2]

Basically, the evaluation team sought to discern pattern and meaning in the various events that had transpired during the life of the Clinic for Learning. We were not interested in the static data that help merely to quantify events but do not reveal them qualitatively. None of our "attitudinal" assessments was derived independently; on the contrary, each was the result of consensus. We saw no one as our "client," but sought to derive our insights objectively in the hope that the children of Junior High School 57 would eventually be the beneficiaries of our investigation.

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[2]It was difficult to obtain school records that went back two years. Indeed, it was most difficult to secure a copy of the original Clinic for Learning proposal. In other instances, it is admitted that even "private" material was shown us in the hope that this material would help clarify our findings.

CHAPTER III

EVOLUTION OF THE PROGRAM

All innovation presumably begins in the creative act of seeing altered ways of doing customary things. To this must be added the felt need as the prerequisite to the acceptance of change. These factors were recognized by New York University, the Ford Foundation, and the New York City Board of Education when they approved the attempt to enhance educational opportunities in a Bedford-Stuyvesant junior high school.

THE PROPOSAL

The relationship between life's chances and educational attainment was noted in the Clinic for Learning proposal:

> If, as our society exists today, there is to be any permanent amelioration of the plight of the impoverished with, as the final goal, the eventual eradication of the city slum, education must play an essential role. It has been documented time and again that in large measure the inadequate education of the inhabitants of these neighborhoods grievously limits the possibility for a basic improvement in their condition. Furthermore, it has been fully documented that teaching standards and teaching performance in these areas are lower than in more well-to-do neighborhoods.
>
> The typical school in a disadvantaged neighborhood in many ways reflects the mood that exists in the slum generally. Even well prepared teachers and administrators are overwhelmed by the pressure of the environment and most teachers find themselves unable in their own terms to satisfactorily cope with the complex educational problems that surround them.

> We believe we can alter these circumstances. New York City has already carefully selected Whitelaw Reid Junior High School #57 in Bedford-Stuyvesant as a typical school in a disadvantaged neighborhood for the demonstration school and steps preliminary to deep involvement are being made by New York University.[1]

Implicit as well as explicit in the proposal was the notion that the social environment from which the poor child comes is a major inhibiting factor in his educational attainment. Indeed, even the school was seen as being influenced by these negative community forces.

> Housing is most marginal with several pockets containing families with no structure at all - such pockets contain families which move about frequently and wherein children "live" with grandparents, aunts, and uncles.[2]

Children were characterized as being "aggressive," and having "antagonisms towards school." They allegedly showed a "low level of motivation," and "defiance towards learning process."[3] Elsewhere in the proposal children were described as in some instances handicapped "by disproportionately high rates of social maladjustment, behavioral disturbance and mental subnormality."[4]

The proposal presented statistics that revealed high pupil mobility in the school, limited recreational facilities, low reading

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[1] John C. Robertson, "The Clinic for Learning," n.d. [reprint], pp. 1-2.

[2] Ibid., p. 2.

[3] Ibid., p. 6.

[4] Ibid., p. 9.

scores, "bad" attendance records, a relatively inexperienced faculty, and the ethnic background of pupils (71 percent Negro, 28 percent Puerto Rican, 1 percent "other"). With this information and knowledge the Clinic for Learning was to reshape the process of schooling positively in behalf of children.

> The Clinic for Learning will demonstrate that the use of pre-professional personnel in dynamic relationship with present teaching personnel can during a radically different teacher training program in the University, the school and community sharply change a Junior High School in the middle of the slum into a school of unusual merit in the education of disadvantaged children.[5]

Further, the child "will reject the negative image aspects of self as determined by racial, ethnic or class background. . . and the negative influence of his peers."[6] "He will increasingly spend his time in pursuits related to education, (less play, stooptalk, cards, etc. . . .He will learn to transfer responses from the concrete. . .to those which are more abstract."[7]

Clearly, the Clinic for Learning was undertaking a monumental task. Its goals were perhaps admirable. However, other factors came to be seen as relevant to the understanding of children's lack of achievement. The children were not themselves solely to blame

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[5]Ibid., p. 7.

[6]Ibid., p. 10.

[7]Ibid., p. 11.

for school failure. The original proposal had set forth a "cultural deprivation" theory which tended to emphasize pupil and community weakness, not strength. For example, is it possible for families "with no structure at all" to exist? Is it wrong to live with "aunts and uncles"? Are Bedford-Stuyvesant children able primarily to think only in the "concrete"? These were some of the allegations. Accumulating evidence was to reveal to University officials that this approach was based on false premises.

The Summer Program

In the summer of 1966 groups of students from Junior High School 57, University personnel, and school officials were invited to the New York University camp at Holmes, New York to "build bridges" to learning. Those interviewed by the evaluation team responded positively in their recollections of this experience, including the Principal of Junior High School 57. One teacher said he had a wonderful time.[8] In his opinion, everyone got along well and was looking forward to the inception of the program in fall. Additionally, he was pleased that he had been paid so well for his participation.

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[8] Interview with former Clinic teacher, December 2, 1968 in Huntington, New York. This person had left Junior High School 57 after the first year of the Clinic for Learning program. He described the school as "impossible."

Thus, despite what the evaluation team felt was erroneous philosophy in the Clinic for Learning proposal, the preliminary steps in establishing the program were effected smoothly. In later interviews, however, we were told that "after two months or so, things began to go wrong."[9] The discontent that did arise occurred once the program was underway at the school.

Interview With Clinic for Learning Director

An interview with the Clinic for Learning Director[10] confirmed this initial finding: things did start off on a relatively even keel but attitudes that created conflict emerged early in the program. The Director told us that Clinic persons and school officials seemingly started with the same premises about educational needs of children but soon diverged in their views. The Director came to see Junior High School 57 as an oppressive place. He felt that New York University was able to change more readily than was Junior High School 57, and was firmly convinced of this after the first year of the Clinic for Learning program. New York University came to believe that ghetto children can be educated but that schools cannot be changed. Rather, enclaves would have to be developed

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[9]Interview with Assistant to the District Superintendent, District Superintendent's office, May 23, 1968.

[10]Interview with Clinic for Learning Director, New York University, April 29, 1968.

within the school which could function outside the normal procedures so as to effect changes in learning patterns. The Clinic Director reported that a member of his staff felt Junior High School 57 was "in a state of educational collapse" and that ongoing work in the school was "irrelevant and dishonest." In effect, the school itself was characterized as being a significant part of the "urban problem" and he doubted that the school contained the potential to regenerate itself.

Furthermore, the Clinic Director, who believed that a truly impressive teacher training program had been set in motion through the Clinic for Learning, supported the concept that teacher training ought to have a field work component built into it. He felt that teachers at Junior High School 57 in some instances were racist, lacked subject expertise, and generally were bad models for children largely because they were graduates of inadequate training programs and had learned little about ghetto communities and their children. When asked why the Clinic for Learning had remained for the entire two years, his answer was that it was hoped that more could be learned about Junior High School 57 and that teacher training would be enhanced by using the school as a "field" situation. It was hoped also that many of the children would eventually be reached by the Clinic.

Interview with Assistant to District Superintendent

Interviews were held with persons in the District Superintendent's

office in an effort to verify or disprove the fact that the Clinic for Learning incurred rough going in its early stages. We were informed by the Assistant to the District Superintendent that the program, which began on a cooperative and optimistic plane, soon was reduced to an atmosphere of distrust and discontent. Objections arose over what Clinic personnel wanted to teach (for example, Yoga was offered as a course) and the departures from normal curriculum procedures. School officials thought that University personnel were not well acquainted with children in school. Little direction, purportedly, was given student teachers. Things appeared too random. It was even alleged that staff stability and spirit at Junior High School 57 were undermined. We were told, "Almost all teachers were opposed to the Clinic."

No antagonism was voiced toward the Clinic for Learning Director. Indeed, he was characterized as a "nice guy," who was competent but apparently had no "influence" at his own institution. It was asserted that the Clinic for Leaning did not bring to bear the wider resources of the university in the Clinic program, e.g., dental services, social work assistance, etc. After The Way It Is, the film about the Clinic for Learning, appeared we were told that parents complained to the Superintendent's office; they wanted the Clinic out of the school. This was still in the first year of the experimental program.

Interviews With the District Superintendent

Since the District Superintendent is theoretically responsible for the educational programs in schools within his jurisdiction, the evaluation sought to place his role in perspective with regard to the Clinic for Learning.[11] Of particular interest to us was the finding that he was first informed about the Clinic for Learning's location in Junior High School 57 by an assistant in the Office of the Superintendent of Schools. Neither had the Local School Board been consulted at first, but he persuaded them to accept the Clinic for Learning; in his words, he "convinced them to give it a try." Indeed, at a meeting with New York University people before school opened in fall 1966, one of the black teachers at the school voiced reservations about the University's "missionary attitude." This kind of reaction was heightened later in the program, we learned, by New York University's failure to include black personnel on its in-school staff. Though this omission was interpreted as an "oversight," it nonetheless aroused negative feelings on the part of persons in a community that was mostly black.

Despite growing objections, the District Superintendent revealed that he was willing to go along with the program. However, when

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[11] Two interviews were held in the office of the District Superintendent: May 21, 1968 and May 27, 1968.

in January of 1967 parents of children in the SP program (special enrichment program at Junior High School 57) complained that their children were not getting enrichment experiences in their seventh grade cluster classes, he felt he had to act. It was "a major turning point." The reading specialist at the school, for example, was denied permission bythe Clinic to hold an essay contest on Negro History. It was explained by Clinic personnel that the lower achieving children would first have to be brought to a higher level. This was interpreted by school officials as "shortchanging" the brighter children.

In a visit to Junior High School 57 in early spring 1967, the District Superintendent, accompanied by officials of the Ford Foundation, observed a high exponent class. He reported the impression that there was no "central plan" to the instruction going on and that many "militant" books were in the classroom. These were contributed by the teacher, who did it on "his own." Allegedly, neighborhood people found this disconcerting, and University representatives were unaware of what was happening in this particular classroom.

The District Superintendent further offered that New York University persons did not meet regularly with Junior High School 57 teachers, there was no planned schedule of events, and school scheduling was not taken into account. When he offered the use of

the district Reading Specialist, the Clinic refused it. Finally, he suggested the creation of a joint Planning Board. It was never formed. Indeed, the Clinic for Learning Director, feeling himself hamstrung, called for a meeting with the Superintendent of Schools to consider such complaints by Clinic for Learning personnel as the fact that children were not allowed out of the building during schools hours to participate in a community study. Again the District Superintendent suggested joint planning meetings, but as he stated, "They generally failed to take place."

In late spring 1967, 18 University teaching fellows were to be placed at Junior High School 57. But when parents objected until they were told to what use the fellows would be put, the fellows were eventually placed in another school.

According to the District Superintendent there was no accounting for the money being spent in the Clinic for Learning. The community was growing skeptical over the Clinic program. Things were bad enough in the district with respect to teacher experience (about 50 percent of teachers in the district had three years or less of teaching experience) and New York University had brought in "even less experienced" persons.

Relationships between University and school were deteriorating. Interestingly enough, events prior to the beginning of the Clinic for Learning had reflected cordial and efficient relationships. A

check of correspondence on file in the District Superintendent's office revealed this to be the case as far back as December 1965. In a letter to the Clinic for Learning Director before the inception of the Clinic the District Superintendent spoke approvingly of a "bold and different approach to old problems."[12] Correspondence between the Principal and Clinic Director also revealed initially a happy working relationship between school and University officials.[13] However, the letters and memos gradually became more antagonistic as the Clinic program proceeded, a state of affairs that was epitomized in a letter from a candidate for the in-school Clinic Director job, turning down the position and outlining his reasons.[14] Many of the criticisms of the Clinic program found in this letter were voiced by school officials. By the end of the first year, criticism of the Clinic had mounted as did, commensurately, discontent with school officials on the part of University persons. Where the children fitted into this picture was not yet clear.

A Board of Education specialist in community relations, who was working in the District Superintendent's office, made an even more startling claim. She revealed that children in the Clinic

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[12]Letter dated February 18, 1966 from District Superintentent to Clinic for Learning Director.

[13]The Principal of Junior High School 57 spoke approvingly of the Clinic for Learning Director, even when the latter was involved in the APEX program at the school. This was before the Clinic was officially started. Letter from school Principal to New York University Dean of the School of Education, March 23, 1966.

[14]Letter on file in District Superintendent's office, dated June 15, 1967.

program had "done worse" in reading than children previously did. She could not at that moment offer the evidence for this but claimed it existed. After a time she admitted, however, that individual children had been helped in the Clinic program, but "not many." She revealed, also, that "the first real confrontation -- beyond the whispers" occurred at a meeting of the Advisory Board on March 17, 1967. Criticisms were openly voiced: New York University personnel were accused of not really knowing the community and of being uncooperative toward school officials. The Afro-American Teachers Association also voiced opposition to the Clinic program.[15]

The reasons for opposing the Clinic for Learning were: "unfulfilled promises," "bad discipline among children," "no black people hired by New York University," "no new curricula developed," "bad choice of university students,"[16] and the feeling by community that the program would eventually serve to prove that "children can't make it."

In brief, various neighborhood persons came to view experimentation at Junior High School 57 with suspicion. They did not

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[15]An interview with the present President of the Afro-American Teachers Association in August, 1968 corroborated this finding.

[16]Interview with community-school liaison representative in the office of the District Superintendent, May 21, 1968. She told that parents referred to the students from New York University as "tore-up hippies."

want the lack of success in the program to reflect negatively on the children in the school. However, as reported to the evaluation team, Junior High School 57 was now "shook up." Parents had not been happy with the school before the Clinic for Learning had been instituted. With the arrival of the Clinic their expectations for improvement were raised only to be frustrated.

Interview With School Principal

We thought, too, that the school Principal would have definite views about the Clinic for Learning. He was opposed to the Clinic, along with other school officials. Many of his objections were along administrative lines. He was disturbed that cluster coordinators did not spend the same amount of time at the school as did teachers not in the program. He was opposed to what he called "absentee leadership," as reflected in the infrequent appearances at the school by the Clinic for Learning Director. He also noted that there was no in-school director of the program for the first year. No clear-cut decision making procedures had been erected; children, he alleged, often left the classroom and the school without approval of his office. He felt, generally, that New York University was operating outside Junior High School 57 lines, and that his responsibility for the children and teachers in the school was being violated. As things grew worse during the first year,

his name was removed from Clinic for Learning stationery. This proved to him, he thought, that the University and the school would not get along;[17] "structure seemed absent in the program."

It began to appear to the evaluating team that antagonisms had become personal as well as academic. The Principal told us that he opposed the serving of cocoa to clinic students because, as he said, "my men would have to clean it up when it spilled."

There was no mistaking the personal animosities that had indeed developed by the end of the second year of the Clinic for Learning. Members of the evaluation team made sure to apprise all persons (university and school officials) of purposes of the research, to whom they intended to speak, etc., lest it appear that the team itself was taking sides. This situation forced us to seek evidence beyond interviews and the statements of certain prominent figures. We spoke to children and teachers; we observed classes in session ; we reviewed taped materials. After all, perhaps the Clinic for Learning did create improvements; children might have been learning. Virtually no persons had specifically referred to the benefits of the program in our discussions with them. We turned to a closer examination of the school itself.

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[17] Interview with Junior High School Principal in his office, April 29, 1968. Several other interviews were conducted with his permission throughout the observational sessions conducted by the evaluation team at Junior High School 57.

CHAPTER IV

OBSERVATIONAL FINDINGS

After many interviews the evaluation team sought to validate findings by turning to the classroom. Various informants had lined up on one of two sides: university persons were opposed to school officials; and school personnel were negative toward university officials. It looked much like a family squabble, with the children caught in the middle. Responses to our queries were rendered mostly on the bases of emotion and attitude by administrators, faculty, and staff.

Junior High School 57 occupies a considerable space in a neighborhood that is largely a slum. Such a large building must in itself have an influence on the lives and perceptions of those who are connected with it. Rows of brownstone homes and tenement buildings worn by time line the streets adjacent to it. University and school personnel were transients in the community. Indeed, very few persons at the school seemed to have any insight into the lives led by the children who attended the school. Much of what the children were capable of was lost in the interpersonal antagonisms among teachers and between school and university staff.

Our observations were made mainly in May and June of 1968. On every occasion we found children out of class, some of them truants we learned, others simply wandering. Traffic in and out

of classes was constant. Many classes started late. Absenteeism was striking. None of the evaluation team members was stopped in the hallway by teachers on patrol or any others. We could only conclude that meandering this way was not unusual. Few school staff, in fact, knew that an evaluation of the Clinic program was being undertaken. Only the children seemed wary; when one of the members of the team approached him, he said, "You going to give us a hard time, too?"

Interview With In-School Clinic For Learning Director

We were directed and assisted in our classroom observations by the in-school Clinic for Learning Director, who had been hired at the beginning of the second year of the Clinic program. This gave the university staff a person who had had experience in the Teacher Corps and who might know the children, being himself a black man. He turned out to be a very forceful personality who became by his own admission the Clinic's representative in dealing with the Principal of Junior High School 57. Had such a person been assigned during the first year, a joint structure between university and school might have been established. By the second year, opposing forces had already taken root. When he was asked what he felt was the major contribution to children made by the Clinic, he answered: "They feel better about themselves." Had their learning been enhanced? Were achievement levels higher?

He answered affirmatively to both questions.

Classroom Observations

To see if children were feeling better about themselves, and learning more, the evaluation team entered various classes in session. A typical art class was described as "a demoralizing experience" by the observer. The teacher constantly spoke at the top of her voice. Children sat with hats and coats on, though it was a spring day in May. A can of paint was spilled. One child was discovered not to belong in the class, but he would not leave; three others did leave for no discernible reason. Four children painted while the others sat and chatted (a total of 12 children were in attendance). At the end of the class, the teacher remarked to the observer: "They want an education?" In the observer's view, this was an art period, but not a class in art.

To be sure, the cluster teachers' meetings we attended revealed that teachers were largely taken up with the behavior problems of children. Discipline seemed a constant problem. Discussion centered around the fights some children were having, and how difficult it was to get parents to come to school when disciplining children. This was now toward the end of a two-year period at Junior High School 57, when presumably teachers and children would be getting along together well. At one meeting a teacher suggested that "if

you have no club over the kids, they're going to dog off."

We found also that teachers were instructing children in curriculum areas the teachers had not been prepared for. For example, a social studies teacher was assigned to the reading program. Another teacher, formerly in the printing trade and in his first year of teaching, was assigned to the science program though his field was social studies.

One member of the team reported the following observation from a science class:

> A boy squeezes his hand through the grating of the window and methodically floats strips of paper through the window. Having run out of paper, he pulls out a sandwich, takes a bite under his desk, then floats the sandwich out the window. Then a pencil. Mr. _____ has been lecturing all this time with an eye on the boy and an almost helpless glance at me. A student teacher remains perched on his desk top, seemingly unconcerned. . .Mr._____ is now seeking answers to questions from the boy who had been floating papers out the window. To each question the boy responded, "nigger." This happened two or three times.

Also present in this room was another college-aged man. When asked who this person was, the teacher told the observer that he was "probably a friend of the student teacher." Through it all, as on other days when the evaluation team was present at the school, the loudspeaker blared announcements; some announcements followed immediately after others, countermanding and revising them. Many of the announcements were admonishments to the students over and over on how to behave.

One teacher in one mathematics class was judged to be very effective. She volunteered that most mathematics teachers in the Clinic for Learning program were not licensed in that area, and that materials were hard to get despite the money that had been allocated to the program. She described her work as "trying to put a band-aid on a great gaping sore."

Paradoxically, a number of teachers observed in classes not part of the Clinic were also judged effective. One such teacher, who was described by a member of the evaluation team as a "jewel," lived in the neighborhood and was liked and respected. When asked why he was not in the Clinic for Learning, he responded: "No one asked me." Since teachers had to volunteer for the program, several excellent teachers were overlooked or chose to remain outside the program.

Still another teacher said that she had obtained the position of cluster teacher by chance, having come from another city in the summer of 1967 seeking work. A friend told her about the program, and she was able to land the job only weeks before the semester began at Junior High School 57. Though she felt she benefited by her involvement, and was very positive about the in-school Clinic Director, she said she would not return to the school the following year even if asked to do so. She cited "administrative interference" and "chaotic conditions" as reasons for her decision.

Some student teachers were evaluated as effective. In fact, much of the curriculum material shown to us had been developed by student teachers on their own. One student teacher who was hopeful of obtaining a regular position at the school the following year chose not to return after having had an argument with an Assistant Principal. That teacher reported that he had momentarily left his hall duty post and was admonished for it. He felt he was improperly chastised, and was convinced he could not work in a school bound by such strict administrative procedures.

Members of the team concluded that "materials, except for mathematics, lacked scholarship. . .What was clear, above all else, was that curriculum was not given any serious thought." Furthermore, curriculum "reflected the absence of policy. As is so common, the social studies. . .suffered most." Teachers apparently did not know how to arrange spatial and temporal learning dimensions in ways appropriate to the subject matter. Classroom arrangements for the most part were the same in all subject areas. Little insight was evident into children's subcultural ways, as fostered in their personal lives. Thus, no translations of out-of-school tendencies were made to school procedures. It was at times difficult to tell that an experimental program in educational innovation was in its second year. Protocol prevailed to the detriment of scholarship.

The Children

The children had their own versions of what was happening at Junior High School 57. Many of them said it was a "bad school." Several said the kids were to blame; others said the teachers were no good and they objected also to the seemingly rigid patterns of administrative control. As an example of the lack of consideration by the school for the varied nature of activities fostering learning, the children reported this story: A group had been scheduled for a trip to the shore to collect shells. When some of the girls appeared in slacks, they were sent home to change into skirts. The girls reported that they had gone to a friend's house near school, rolled up their slacks, and put their skirts over them. On the bus, they removed their skirts. Obviously, according to the evaluation team, the girls were more sensible than the purveyors of school rules. Though order was primary at Junior High School 57, the children made their way around these constraints when necessary.

We found that very little was ever completed in class. All lessons had a tentative character. Perhaps students knew that a heavy emotional investment in learning particular lessons would lead to disappointment since the bell would ring for change of class before too long. Could this be why they often sat with coats on in the classroom?

Many children having had no alternative experiences in formal learning accepted school life as customary. Some had the view that the Clinic for Learning was for "dumb" kids. Other children not in the Clinic never heard of it. Some associated the program with a remedial reading effort. Few among the children we interviewed could reveal its programmatic structure. But most students cited the physical decay of the school: broken windows, unpainted walls, locked bathrooms, and general disrepair. They mentioned being hit with yardsticks; on occasion, with belts, too. Some were slapped and called names or threatened with "bad things" on record cards. Indeed, one student laughed when asked if he had been hit. "Where you been, man?" was the reply. The Clinic for Learning office, as a matter of fact, turned out to be a refuge for many students. They reflected that they "liked to be around them," meaning persons in the office. Here, they felt, they could discuss a problem with a person who would be interested.

Evidence of Achievement

We had found that classes in and out of the clinic were good and bad, mostly the latter, in our judgment. Clinic people felt that the school was chaotic. School people felt that the Clinic was no better. We chose, then, to seek demonstrable evidence of school achievement. Did reading scores improve significantly in the Clinic? Was absenteeism markedly reduced? Curiously enough,

the Clinic for Learning kept no records of attendance on its own. Reading scores culled from school records appeared on a plain piece of note paper, not officially entered on documents of any kind. A member of our research team eventually was able to secure data on these categories -- reading and attendance -- after a week-long search which led him to a locked room in the basement of the school. The school administration did keep such records, but they were difficult to find. In brief, the records revealed no significant improvement in reading or attendance. Most classes, in the Clinic and out, remained two years or more behind grade levels. Absenteeism was high in the seventh grade and even higher in the eighth grade, the second year of the Clinic for Learning program.

Interview, observation, and study of documents suggested that the Clinic for Learning did not succeed in its original intent. We realized as well that Junior High School 57 was not a receptive host for innovation. Both university and school, though staffed with some individuals of high competence, served to discourage learning among children, even if unintentionally.

CHAPTER V

CONCLUSIONS

The findings of the evaluation team led to certain conclusions as to why the Clinic for Learning had not been successful, in the terms it had originally set out for itself. It was, in simplest terms, the case of the hostile host and the alienated innovator. Junior High School 57 turned out to be unreceptive to New York University; and New York University had not been capable of altering the style and character of the educational and interpersonal life led by teachers, administrators, and students at the school. The university was a claimant in behalf of educational reform, and it had no sponsor. In turn, the university was not adequately prepared to make its suggestions for change persuasive, for its program lacked intellectual substance in many ways.

Even in terms of isolated occurrences, many things contributed to failure. Curriculum was hastily conceived at the start of the school year in 1966. The Local School Board and the District Superintendent had no initial say in choosing Junior High School 57 as the site for the Clinic for Learning Program. No black person was assigned by New York University to the Clinic staff at the school. No specifically delineated lines of authority were created by which decisions would be made. Parents were not functionally integrated into the program. Children were not organically involved in the

program. No specific means for evaluation throughout the program were constructed. In short, despite the institution of a cluster format, the educational life of children was not significantly altered. Schooling remained virtually the same for them: unrewarding and, in many instances reported to us, repressive. With all this, neither the university nor the school could overcome many petty antagonisms. The school maintained its stable and persistent character, indicating perhaps that schools are indeed difficult to change without careful advance planning and massive effort.

The failure of the Clinic for Learning reveals, we think, that ideologies reflecting on the life-styles of the poor, and philosophies of cultural deprivation, are irrelevant and oblique to considerations of why children do not achieve higher levels of learning. Quite clearly, it was not the children who caused failure of the program. It was neither the children's home life nor community influence that prevented success. Indeed, what happens to children in schools must be sought in the schools themselves. This much has been learned from the two-year Clinic for Learning experience.

Unfortunately, we did not find that school officials were able to conclude this, as well. The school felt it did an adequate job. Many at Junior High School 57 continued to believe that children were being adequately educated. Nothing in the data collected by

the evaluation team allows such a determination. On the contrary, we find that New York University's sense that schools have to be changed is verified by the experience of the Clinic for Learning. Its failure to have accomplished the purpose it set for itself simply indicates the enormity of the problem. Not only does the content and portent of proposed change in schools need close examination, but so do the social processes by which these changes would be effected.

More precise insights are needed into the nature of the meaning of community and the relationship between community and school as these affect behavior. The training, recruitment, and retention of teachers need further investigation. The behavior of teachers, themselves products of the public schools, has to be reviewed carefully. And children's learning styles -- the strategies they develop to counter teachers' negativism -- are not well enough understood. Of what, in fact, may "underachievement" be a function? Is a theory of cultural deprivation by itself adequate?

Answers to these questions must be sought beforehand, if educational innovation is to be potentially successful. It may well be that the pockets of poverty that have come to characterize our inner cities have evolved into situations where schools have become an integral and causal aspect of class differentiation and deprivation. Quite obviously, there is a need for classroom

ethnography. The discrepancies between real and ideal culture are markedly seen at Junior High School 57. And the ideological lag between university conceptions and the real lives of the poor was personified in the erroneous premises of New York University's original conception of the educational problem at Junior High School 57. The noneducative functions of schooling have been overlooked, and the educative aspects and influences of community life have been denied. This, we think, is a misunderstanding vis-a-vis the nature of cultural transmission. What kinds of children, in the long run, are schools attempting to produce? What will be the consequences of the failure to properly educate the poor? The viability of the school as an institution is certainly at stake in the answers to these questions.

The Clinic for Learning experience indicated that educators could not significantly talk to one another. How then can they be expected to talk to children? If education is discontinuous with out-of-school life, its legitimacy needs questioning. The major benefit of the Clinic for Learning experiment may well reside in the awareness of this fact. If parents and students are to reject and avoid fatalism as an educational philosophy, new approaches to education must be sought in which those same parents and students will be functionally involved. The absence of parent and pupil influence in the Clinic for Learning stands out in stark relief.

FINDINGS AND RECOMMENDATIONS

Hindsight is not necessarily a mark of wisdom. Therefore, the evaluation team did not construe its task to be one of assessing blame in behalf of individuals involved in the Clinic for Learning experiment. Successful change must transcend personality differences. If anything has been learned from the program, its manifestation will be present in future attempts at university-school-community cooperation. Our findings and recommendations are bent toward that end. We recognize the role played by chance, as well as by rumor and misinterpretation, in innovation. There remains the responsibility to reduce the potential margin for error in programs that affect the lives of children. Our findings will, it is hoped, serve that end.

Felt Need: Definition of the Problem

The university's definition of the educational problem at Junior High School 57 was incomplete. Conceptualization of children's learning needs and capacities was formulated by professors who were not in every instance perceptive of the real lives children lead. Children and parents, indeed, might have had alternative perceptions. The "vacuum ideology" of "cultural deprivation" was later felt to be insufficient.

Recommendation

A definition of the problem and an articulation of "felt need"

must come from the recipient population. In this way, those who would benefit from change are given a sense of participation and responsibility in programs in their behalf. Additionally, the innovator can test his own "cultural first assumptions" against the perceptions of those being described.

Culture and Community

Faulty and fragmented knowledge of the community in which Junior High School 57 was located obtained. School failure was largely attributed to the life led by children out of school. The strengths of family and community institutions were overlooked by the university. The "culture of poverty" concept was uniformly applied to people's lives, without sufficient knowledge of those lives and the variations that take place within them. The establishment of the school-community liaison program was never fully manifested.

Recommendation

A survey of the community and its tangency to the larger society of which it is a part has to be made initially. Community self-descriptions are paramount and prerequisite to working with the community. This suggests the inclusion of lay persons and neighborhood representatives in all programs relating to the community. Further, this accords status and responsibility to residents

who will have to live with the results of innovation. Indeed, a sign of innovative success is the ability of the host to carry on after the innovator departs.

Receptivity of the Host

Junior High School 57 was a hostile host to New York University. Successful change hinges on the establishment of a complementarity between host and innovator. This did not occur. The choice of Junior High School 57 as the site for experimentation was, in the end, a bad one.

Recommendation

Selection of the place for innovation must be derived jointly, with the permission of the innovator and the host. Joint planning is necessary. When schooling is involved, parents and children are also to be consulted. One definition of the poor is that they sometimes are unable to avoid the remedial programs rendered in their behalf, which turns out to be an additional sign of their political powerlessness. To avoid improper estimates of the potential for change, the place selected for change must meet the approval of all involved.

Selection of Personnel

New York University did not represent in its hiring the goals

of the program it hoped to institute. Namely, it did not hire, in the first year, an administrative member of its staff who was black. In a school with a population more than 70 percent black, this appeared as an insult to the community. The community could not accept a program that in its staffing was not representative of the goals it purported to want to achieve.

Teachers were sometimes chosen because they volunteered for the program. Wanting to do something does not necessarily ensure that it will be done well.

Inclusion of minority group members in programs in behalf of minority groups is essential. Selection of personnel has to take into account competence, of course, but it must be concerned with relevance as well. Particularly with respect to minority groups, attitudes and feelings, not just subject familiarity, must be considered in programs of educational innovation. Behavioral tensions are thus lessened. Hiring a person who "just stepped off a bus" because her subject is relevant is a weak procedure. The "person," not the "slot," is of importance.

Planning and Flexibility

Curriculum planning was not sufficiently accomplished before the program began. Indeed, revisions were hastily made at the start of the experimental program. Nor was there sufficient flexibility in adopting new ways when prior ways proved inconclusive.

Though the cluster format presumed to be an innovation, curriculum remained substantially the same for children.

Recommendation

Precise formulation of the anticipated change process should precede implementation of the change. Curriculum has to be related to the real lives of students in order to be meaningful. Subject matter that is formulated around protocol and school format exclusively will have no out-of-school application. Its validity is thereby challenged. Perhaps New York University was partially correct: "The children are the curriculum." Unfortunately, it could not implement this philosophy. Another recommendation to consider would be that all school life must have an action component built into it. It is highly doubtful, we think, that total education can take place within the school alone. Getting out of the classroom is a major curriculum change needed. In-school education alone is confining and restricting, given the variety of personal and learning styles represented by children of different ethnic groups.

Evaluation of the Program

There was a failure to provide ongoing evaluation of the Clinic for Learning program. Reading and attendance records were difficult to obtain by the research team. Effects other than "feeling better

about oneself" have to be catalogued.

Recommendation

Evaluative procedures have to be an integral part of innovation. If this is absent, how can the process of innovation be interpreted? A research aspect ought to attend attempts at innovation. In this way, even if programs fail to meet anticipated goals, there are important research revelations. Innovation and research can coexist. If this had obtained, both New York University and Junior High School 57 would have known why the Clinic for Learning had not succeeded.

Participation with Function and Status

There was a failure to accord clear-cut function and appropriate status to those involved in the Clinic program. People were not sure at what points in the sequence of events, and from what positions in the social structure, they were expected to act. Teachers and students found their loyalties divided between university and school.

Recommendation

A joint social structure has to be erected when independent groups work toward change. Change is of necessity a reformulation

of the old. Some vestiges of the old need to be maintained to create a sense of continuity. Simply undoing the old totally doesn't work. There have to be defined lines of communication, so that the flow of information is enhanced.

Accountability and Responsibility

Because no discernible organizational pattern emerged to accommodate all persons in the experiment, factionalism was manifest. Without clear authority there was no clear accountability. Had this not been so, accusations of blame would not have accrued. It would have been apparent where, and at whose hands, things occurred.

Recommendation

The willingness to compromise should characterize the activities of innovators. Just as the innovator benefits by enhanced professional standing when he is successful, he must be willing to accept failure honestly. This must be true of the host, as well, when he has contributed to failure. Education has traditionally been marked in schools by the unwillingness of educators to be accountable for failure.

Probing Past Successes

It is not apparent that past successful attempts at innovation were taken into consideration in the Clinic for Learning experiment.

What had occurred in the APEX program? What significance did it hold for the Clinic? Had other programs succeeded under similar conditions?

Recommendation

Big failures are worse than small ones. Small successes are better than big failures. Perhaps New York University should not have taken over the entire seventh grade for its experiment. A smaller demonstration grouping would have allowed more flexibility and greater scrutiny over the project. Failure is not quite as profound in smaller groupings. This was recognized in the second year of the program when the Clinic for Learning included half the classes it originally involved. Parents and children legitimately object when failure is massive. Further, gross failure precludes the acceptance of other innovators in the same place. Experimenters have a responsibility not only to their subjects but also to future potential investigators. It is doubtful that Junior High School 57, its children, and its parents will soon be open to other innovative programs.

Inclusion of Influential Persons

There was no deliberate inclusion of influential persons in the Clinic for Learning program. Well-known community figures, and

those favorably seen in the public world, were not closely related to the program. Clergymen, for example, and others of high repute were in the main excluded.

Recommendation

Successful change often hinges on the approval of persons of high status. If only for its symbolic quality, positively-seen persons are to be included in change programs. Often those who ostensibly would benefit from change do not respond positively because they "do not want to make the innovator look good." However, these same persons would want to make those they admire indeed look good.

Attitudes and Beliefs

Beliefs irrespective of their verifiable content form the bases for reality for all persons. New York University failed to properly catalogue the beliefs held at Junior High School 57. In like manner, it was unaware of the discriminatory attitudes of some teachers.

Recommendation

Where attitudes must be changed for innovation to succeed, the innovator must be aware of existing beliefs and myths. The need

for "sensitivity" training and broad-based preparation with regard to feelings is clear. The covert aspects of behavior extend deep. One cannot judge intentions by overt tendencies alone.

Perceptions Held of Innovator and Host of One Another

The original perceptions held of one another by the university and the school proved unfounded. Prior, informal,and unofficial contact should have been instituted. Both groups came to have altered images of one another once the program was underway. They were then incapable or unwilling to revise these estimates.

Recommendation

Innovator and host have to be aware of the potential for disruption in change attempts. How does change fit into the existing lives of both innovator and host? This must be clearly answered and understood before change occurs. Imbalance and disequilibrium are potential consequences of change. The search for balance is ultimately the creative aspect of change. It may well be that Junior High School 57 cannot return to former ways as the result of having housed the Clinic for Learning. Will this itself prove positive or negative?

Existing Units of Cooperation

There was a failure by school and community to recognize existing structural forms: teachers' organizations, the Local School

Board, parent groups, and community action agencies. Failure to involve them gave a negative connotation to the program and precluded their support of it.

Recommendation

Periodic "rites of intensification" are central to reinforcing group orientation and common goals. Meetings of change agents and hosts might well coordinate with other events that affirm innovative intent. Having meetings in neighborhood churches and community centers gives neighborhood persons a sense of involvement and approval. The school is only one institutional arrangement among many in the community. Establishing tangent relations between school and community enables joint support. Bypassing significant persons and groupings that have acknowledged function causes anxiety and detachment.

Timing

The timing of innovation is critical in contemplating success. Perhaps New York University should have experimented initially not only at the summer camp at Holmes, New York, but also in the school during the summer. During periods of diminished activity existing ways of doing things are not so much at stake.

Recommendation

The beginning of the school year may not be the best time for inspiring change. People are normally anxious about the new school year. Periods of slack allow persons to consider their involvement without pressure. In this way rumor is averted, an innovative time-table can be set in motion, feedback is fostered, progress reports can be produced, and open discussion of policy can take place in the absence of urgency.

Coordination

There was a lack of coordination of the overall project. Social work aspects, community liaison efforts, classroom instruction,etc. were not functionally interrelated.

Recommendation

One aspect of change will influence all the other facets of change. As these go on in parallel fashion it is necessary to assess their joint as well as their independent qualities. It may well be that the social work component of a program, for example, succeeds, while the curriculum aspect does not. These have to be brought together in contemplating the significance of the total effort. Individual teachers might be quite good, but are overlooked when an entire program looks bad. Positive aspects need to be

identified, if only to understand how they emerge when other parts of a program fail.

A FINAL COMMENT

It seemed to the evaluation team that both New York University and Junior High School 57 formed a "contraculture" to that of the child. University and school were in the community but not of it. They have had a tentative effect on the lives of neighborhood residents. It appears to us that they will never be fundamentally related to the community until they draw upon the community for their own sustenance. There is much to be learned outside the fortresses of university and school. The failure of the Clinic for Learning has shown that most clearly. No longer can the school define the nature of slum community life; rather, the reverse emerges as true: the school and the university will more likely conform to the community's definition of them. Let us hope it will be a peaceful redefinition and transition.

APPENDIX A

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APPENDIX B

JUNIOR HIGH SCHOOL - NYU (CLINIC FOR LEARNING) PROJECT
Evaluation Design

A. The Clinic for Learning was apparently set up through the initiative of New York University in conjunction with the New York City Board of Education and Junior High School 57 in Brooklyn. Its purpose was to improve and enhance learning in the seventh grade of Junior High 57 by new and innovative approaches to education. It had its inception in Fall 1966 and is now completing its second year of operation.

As revealed in a meeting at Junior High 57 on March 15, 1968, the project has failed to meet the goals anticipated when it originally began. Ostensibly, the purpose of an evaluation of that project would uncover the successes the project did achieve and the reasons for those failures that did occur. In addition, an evaluation would assess the feasability of continuing the project and would derive a model for future innovative undertakings of a similar nature at Junior High 57 and similar schools. Important, as well, would be a study of the relationship between university and public school in cooperative educational endeavors. What are the roles of these respective institutions? And what is the role of community groups in the implementation of school practice? Was the initial plan faulty or did the invclvement of particular persons or groups mitigate against success, despite well made plans?

B. Inevitably, an evaluation of the NYU - Junior High 57 project would include a study of Junior High 57, itself, and its relationship to the larger community of which it is a part. School culture and social structure may be so arranged as to allow only particular kinds of educational successes, and not others. And neighborhood feeling and sub-cultural patterning may, similarly, have profound influence on students achievement performance. Thus, many aspects of school in community will have to be assessed, while at the same time the procedures of NYU personnel are carefully appraised.

Interview and participant-observation will be primary techniques employed by skillful and careful researchers whose sole interest is an objective evaluation of the project, and the implications such an evaluation would have for the education of children in the schools. The project will be traced sequentially from its beginnings, and qualitatively for its impact on all personnel involved throughout its course.

It may be possible to assess the project by the achievement level students who have attained within it and by the manifestation of new behavioral tendencies among students, their parents, teachers, and other school persons. Newly accrued attitudes and feelings are often more significant than test scores and achievement levels. Thus, the covert and latent influences - positive and negative - will be screened, as well as the overt marks of success or failure in the project. Several questions will need asking:

1. How did the project originate? Whose responsibility was its organization and implementation? Was there a specific and legitimate "felt need" expressed? By whom?

2. How was the "target" or "recipient" population chosen? Was there a particular order of priority in making this choice?

3. How were project personnel recruited and incorporated into the project? How was it planned to assess their effectiveness? Were specific selections of persons of critical relevance as the project progressed? Were important changes necessitated? Why?

4. Was a particular sequence planned toward implementation of the project? Did this have to be revised? What occurrences could not be planned for?

5. Can significant event analyses be revealed? That is, were there particular events that lent a distinct and marked character to the project? Were there, for example, any periods of crisis? By what description would such a crisis be characterized?

6. Were any people seen with resentment for their participation in the project? Why? Could this have been avoided?

7. In terms of initiation of activity and contacts made with persons related to the project, which people took prominence? Was this originally intended this way?

8. Was reward an inducement to participate in the project? For example, were special hours offered to project teachers? Were salaries higher for these people? Were children permitted special dispensation of any kind? What psychological rewards were evident?

9. Did chance or error play an important role? What inadvertent occurrences significantly influenced the course of the project?

10. Were there any conflicts of personal interest? Or, by contrast, did a collective spirit emerge? What was its character?

11. What means of evaluation were built into the project for continual assessment of its progress and purpose? At what point did it become apparent that it would either succeed or fail? Who made this assessment? Was there agreement? Who held opposing points of view? Were these differences resolved?

12. When was the television film decided upon? What was its intended purpose? Did its showing mold opinion about the project? In what way? How do you think it affected the perceptions of the viewing public?

13. How were disputes resolved? Were mechanisms built in to allow for feedback and open discussion? Who were the key "points of tangency" among the various sub-groupings involved in the project? Were students represented?

14. What impact did the project have on teachers and students not involved in it? Did it serve to divide the school population or to enlist it in common educational effort?

15. What demonstrable success were achieved? Specifically. Will these last?

16. Would the project have succeeded in another setting? Could it still succeed at Junior High 57? What was learned, in terms of educational innovative procedure, from the project?

17. Was a study of antecedent activities and school conditions made prior to the project? What were the findings? If no study was made, why wasn't it made?

18. Did rumor and gossip play an important role? How?

19. Who had the most to gain from the project's success? Who had the greatest risk in anticipation of failure?

20. Were there any inconsistencies in the behavior of project personnel? How were these manifest?

C. The results of the interpretation of the data gathered in an evaluation of the project may have important implication for the future education of children in schools. For example, it may well reveal insight into the possible difference in goals, and the means toward their fulfillment, between community groups and professional education groups. Does one group (community) seek operational insights, while the other (school and university) seeks theoretical application? Can these be fused in common orientation? In fact, to whom do children "belong"? To parents? To the school? To NYU?

What (tentative) hypotheses can be drawn from the project experience? Can a model be redrawn for school-university cooperation? Was the project based in false premises to begin with? Was the project a failure because it did not "create" the relevant personalities for the changes it postulated?

D. Follow up

A follow up would imply the erection of a model for change. Such a follow up would really be the behavior of Junior High 57 personnel and the local community in seeking effective school practices in behalf of children. In other words, the evaluation study of the project should offer some blueprints for possible future change, even at a theoretical level, particularly with relation to university involvement.

1. How is the innovator perceived by the host? How does the host perceive himself (what are the relevant self descriptions involved)?

2. Is the technical competence needed for innovation present?

3. How does the innovator communicate his intentions and expertise? What segment of the population is reached in his procedures? Is feedback allowed for?

4. Is the recipient an active or passive host? What evidence is there of the recipient's commitment to the change involved?

5. Is the timing of the innovation well thought out? When is introduction of the new opportune?

6. Is flexibility built in? Is the innovator blindly bent on singular, sometimes, inflexible goals?

7. Is there consistency in innovator behavior? Is the attempt at change consistent or variable?

8. Is maintenance of the project provided for? Who will oversee things when the innovator is not there?

9. Has the host given evidence of prior commitment to the goals of the project (or similar ones)?

10. What is the motivation for the host's desire for change?

11. What are the units of cooperation among the host? Family? Community organizations? Parents? etc.

12. What values and beliefs characterize the world view of the recipient culture? Are these supportive of the planned innovation or antagonistic to it?

E. Budget

Should provide for competent and experienced personnel. As important as the gathering of data will be their interpretation The major investment will, no doubt, be in time. However, tape recorders and other material will be of importance, too.